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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yoursel	f	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is your government-issu picture identification (f example, your driver's license or passport).  Bring your picture identification to your meeting with the truster	First name or  A.  Middle name  Rosenstiel-Graff	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
	ouning und uden	•	
2.	All other names you used in the last 8 year		
	Include your married of maiden names.	or	
3.	Only the last 4 digits your Social Security number or federal Individual Taxpayer Identification numbe (ITIN)	xxx-xx-8064	

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Case number (if known)

Debtor 1 Jacqueline A. Rosenstiel-Graff

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 808 West Jefferson Drive Freeport, IL 61032 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Stephenson County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Jacqueline A. Rosenstiel-Graff

Case number (if known)

Par	Tell the Court About	our B	Bankruptcy Ca	ise					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	Chapter 7							
		□с	hapter 11						
		□с	hapter 12						
		□с	hapter 13						
8.	How you will pay the fee		about how yo	u may pay. Typ attorney is sub	pically, if you are paying the fee you	with the clerk's office in your local court for more determined, you may pay with cash, cashier's check, or more f, your attorney may pay with a credit card or check	ney		
			■ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).						
						only if you are filing for Chapter 7. By law, a judge m			
						r income is less than 150% of the official poverty line installments). If you choose this option, you must fill			
			the Application	on to Have the (	Chapter 7 Filing Fee Waived (Offici	al Form 103B) and file it with your petition.			
9.	Have you filed for bankruptcy within the	■ No	0.						
	last 8 years?	□ Y€	es.						
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
10.	Are any bankruptcy cases pending or being	■ No	0						
	filed by a spouse who is	□ Ye	es.						
	not filing this case with you, or by a business								
	partner, or by an affiliate?								
	annate:		Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your residence?	■ No	o. Go to I	ine 12.					
	residence?	□ Ye	es. Has yo	ur landlord obta	ained an eviction judgment against	you?			
				No. Go to line	12.				
				Yes. Fill out In		udgment Against You (Form 101A) and file it as part	of		

Debtor 1 _ <b>J</b>	Jacqueline A. Rosenstiel-Graff	Document	Case number (if kn	own)
---------------------	--------------------------------	----------	--------------------	------

ar	Report About Any Bu	sinesses `	You Own	as a Sole Proprietor				
<ul> <li>12. Are you a sole proprietor         of any full- or part-time</li></ul>								
		☐ Yes.	Name	and location of business				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numbe	er, Street, City, State & ZIP Code				
	it to this petition.		Check	the appropriate box to describe your business:				
				Health Care Business (as defined in 11 U.S.C. § 101(27A))				
				☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))				
				☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))				
				Commodity Broker (as defined in 11 U.S.C. § 101(6))				
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate nes. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ons, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure I.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am n	ot filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fil Code.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am fil	ling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Part	4: Report if You Own or	Have Any	Hazardo	us Property or Any Property That Needs Immediate Attention				
4.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and	■ No.  ☐ Yes.	What is t	he hazard?				
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Number, Street, City, State & Zip Code				

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Debtor 1 Jacqueline A. Rosenstiel-Graff

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 52 Case number (if known) Debtor 1 Jacqueline A. Rosenstiel-Graff Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 **200-999** How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million **\$0 - \$50,000** □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jacqueline A. Rosenstiel-Graff Signature of Debtor 2

Executed on

MM / DD / YYYY

Jacqueline A. Rosenstiel-Graff

MM / DD / YYYY

Executed on April 10, 2018

Signature of Debtor 1

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Debtor 1 Jacqueline A. Rosenstiel-Graff

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Daniel A. Springer	Date	April 10, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Daniel A. Springer Printed name		
Springer Law Firm		
Firm name		
5301 E. State Street		
Suite 105		
Rockford, IL 61108		
Number, Street, City, State & ZIP Code		
Contact phone <b>815.312.4725</b>	Email address	dspringerlaw@gmail.com
6314059 IL		
Bar number & State		

		Docum	ent Page 8 of 52	2	
Fill in this infor	mation to identify your	case:			
Debtor 1	Jacqueline A. Ro	senstiel-Graff			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an
					amended filing
					-

## Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	1: Summarize Your Assets		
		Your a Value of	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	35,545.50
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	116,575.0
	1c. Copy line 63, Total of all property on Schedule A/B	\$	152,120.5
Par	2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	42,000.0
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	50,201.3
	Your total liabilities	\$	92,201.30
Par	3: Summarize Your Income and Expenses		
l.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,917.6
i.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,869.0
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other scl	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	personal	, family, or

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Page 9 of 52 Case number (if known) Debtor 1 Jacqueline A. Rosenstiel-Graff

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$ 4,300.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

(	Case 18-80777	Doc 1		04/10/18 ument	Entered 04/10/2 Page 10 of 52	18 14:06:	58 De:	sc Ma	iin		
Fill in this inf	ormation to identify yo	ur case and tl	his filing:								
Debtor 1	Jacqueline A. I	Rosenstiel-G	Graff								
	First Name		e Name		Last Name						
Debtor 2 Spouse, if filing)	First Name	Middl	e Name		Last Name						
Jnited States	Bankruptcy Court for the	e: NORTHER	RN DISTR	ICT OF ILLIN	IOIS						
Case number									neck if this is an		
chedu n each category nink it fits best. nformation. If m nswer every qu	Be as complete and acc nore space is needed, atta uestion.	cribe items. List urate as possib ach a separate s	le. If two n	narried people is form. On the	n asset fits in more than on are filing together, both are top of any additional page	e equally respo	onsible for su	pplying o	correct		
Part 1: Descri	be Each Residence, Build	ling, Land, or O	tner Real I	state You Ow	n or Have an Interest in						
Do you own	or have any legal or equita	able interest in a	any reside	nce, building,	land, or similar property?						
	Part 2. re is the property?										
1.1 202 Wa	st Jefferson Drive		What i		? Check all that apply						
	ess, if available, or other descript	tion		Single-family h Duplex or mult Condominium	i-unit building	the amount	of deduct secured claims or exemptions. P mount of any secured claims on Schedule tors Who Have Claims Secured by Proper				
Freepoi	t IL 6	1032-0000		Land	or mobile home	Current val	erty?		t value of the		
City	State	ZIP Code	님	Investment pro Timeshare	perty	\$7	1,091.00		\$35,545.50		
				Other		(such as fe	e simple, ten		ership interest the entireties, or		
			Who h	Debtor 1 only	in the property? Check one	Fee simp	e), if known. D <b>ie</b>				
Stephei	nson			Debtor 2 only							
County				Debtor 1 and D	Debtor 2 only			_			
					the debtors and another		if this is com tructions)	munity p	roperty		
				information yo	ou wish to add about this ite on number:	em, such as lo	cal				

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$35,545.50

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Deb	otor 1	Case 18			Document	Page 11 of 52	0/18 14:06:58 ase number (if known)	Desc Mai	n
3. <b>C</b>	ars. var				hicles, motorcycles				
	,	,	, <b>.</b>	•	•				
	No								
	Yes								
		Hda					Do not deduct sec	red claims or eve	emotions Dut
3.1	Make				Who has an interest in	the property? Check one	the amount of any	secured claims or	n <i>Schedule D:</i>
	Mode		<b>e</b>		Debtor 1 only		Creditors Who Ha	e Claims Secure	d by Property.
	Year:			260,000	Debtor 2 only		Current value of t		value of the
		oximate mileage: information:		200,000	☐ Debtor 1 and Debtor 3 ☐ At least one of the de	•	entire property?	portion	you own?
					At least one of the de	biois and another			
					Check if this is come (see instructions)	munity property	\$1,725 ———	.00	\$1,725.00
5 <b>A</b>						from Part 2, including a			\$1,725.00
Part	3: Des	cribe Your Pers	onal and H	lousehold Ite	ems				
Do	you ow	n or have any	legal or e	quitable int	erest in any of the follo	owing items?		portion ye Do not de	alue of the ou own? duct secured exemptions.
E	Example ☑ No	old goods and es: Major applia			china, kitchenware				
			House	ehold Furn	niture				\$1,000.00
	] No	s: Televisions	ell phones,		edia players, games	uipment; computers, printe	ers, scanners; music c	ollections; electi	ronic devices
							<u>'</u>		
E	Example ☑ No	oles of value es: Antiques an other collec Describe				ooks, pictures, or other ar	t objects; stamp, coin,	or baseball car	d collections;
			Books	s, Pictures					\$100.00
E	Example ■ No	ent for sports es: Sports, phot musical inst	tographic,		d other hobby equipmen	t; bicycles, pool tables, go	lf clubs, skis; canoes a	and kayaks; car	pentry tools;

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Debtor 1	Jacqueline A.	Rosenstiel-Graff	Document	Page 12 of 52  Case number (if known)	
Example ■ No	les: Pistols, rifles, s	hotguns, ammunition	, and related equipment		
Exampl □ No	les: Everyday cloth	es, furs, leather coats	, designer wear, shoes,	accessories	
■ Yes.	_				*
	L	Jsed Clothing			\$400.00
■ No □ Yes. □  13. Non-fare Example	les: Everyday jewe Describe m animals		engagement rings, wed	ding rings, heirloom jewelry, watches, gems, g	jold, silver
_ :::	Describe				
Debtor 1 Jacqueline A. Rosenstiel-Graff  10. Firearms  Examples: Pistols, rifles, shotguns, ammunition, and related equipment  No Yes. Describe  11. Clothes  Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  No Yes. Describe  Used Clothing  12. Jewelry  Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver  No Yes. Describe  13. Non-farm animals  Examples: Dogs, cats, birds, horses  No Yes. Describe  1 Dog  14. Any other personal and household items you did not already list, including any health aids you did not list  No Yes. Give specific information  15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	¢0.00				
		Dog			\$0.00
15. Add th	ne dollar value of rt 3. Write that nu	all of your entries from the second s			\$1,800.00
			est in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
Example ■ No	, ,	, ,	•		non
Exampl	les: Checking, savi				nouses, and other similar
_			Institution r	ame:	
		17.1. Checking	US Bank		\$1,600.00
Exampl —				ey market accounts	
		Institution or is	suer name:		
joint ve □ No	enture			orporated businesses, including an interes	t in an LLC, partnership, and
	•	nation about them			
Official Form	106A/B		Schedule A/B: F	Property	page 3

	Case 1	8-80777	Doc 1	Filed 04/10/18			06:58	Desc Main
Debtor 1	Jacquelir	e A. Rosens	stiel-Graff	Document	————	Case number	(if known)	
		Name	e of entity:			% of owners	hip:	
		LLC				20	%	\$1,300.00
Nego: Non-r ■ No	tiable instrume negotiable inst	ents include pe ruments are th information ab	rsonal check ose you can oout them	s, cashiers' checks, proi	missory notes, and	money orders.		
<i>Exam</i> □ No	ples: Interests	in IRA, ERISA	Keogh, 40°	I(k), 403(b), thrift saving	s accounts, or othe	er pension or prof	it-sharing	plans
■ Yes.	Name of entity:   Name of en							
		401(k)		Target Co	orporation			\$110,000.00
Your s Exam ☐ No	share of all un oples: Agreeme	used deposits	you have ma	rent, public utilities (elec	ctric, gas, water), te			nies, or others
		Electri	c	Common	wealth Edison			\$150.00
■ No □ Yes. 24. Interes 26 U.S ■ No	sts in an educ .C. §§ 530(b)(	Issuer name ation IRA, in a 1), 529A(b), ar	and descript an account ind 529(b)(1).	ion. n a qualified ABLE pro	ogram, or under a	qualified state t	-	
_	s, equitable o	r future intere	sts in prope	rty (other than anythin	g listed in line 1),	and rights or po	wers exe	ercisable for your benefit
	. Give specific	information al	bout them					
Exam ■ No	pples: Internet	domain names	s, websites, p			ments		
Exam ■ No	pples: Building	permits, exclus	sive licenses	•	n holdings, liquor li	censes, professio	nal licens	es
	•		- 300 01011111					Current value of the portion you own? Do not deduct secured claims or exemptions.
	funds owed t	o you						
	. Give specific	information ab	out them, inc	cluding whether you alre	ady filed the return	s and the tax yea	rs	

Official Form 106A/B Schedule A/B: Property page 4

Case 18-80777 Doc 1 Filed 04/10/18 Entered 04/10/18 14:06:58 Desc Main Document Page 14 of 52 Case number (if known) Debtor 1 Jacqueline A. Rosenstiel-Graff 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ■ No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information... 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ No Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: **Target Corporation Life** \$0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue □ No Yes. Describe each claim....... Unknown Workers Compensation Claim 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$113.050.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Part 6 Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

☐ Yes. Go to line 47.

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Case number (if known) Document

Debtor 1 Jacqueline A. Rosenstiel-Graff

53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00

Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$35,545.50 Part 2: Total vehicles, line 5 \$1,725.00 Part 3: Total personal and household items, line 15 57. \$1,800.00 58. Part 4: Total financial assets, line 36 \$113,050.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$116,575.00 Copy personal property total \$116,575.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$152,120.50

Official Form 106A/B Schedule A/B: Property page 6

			III I AUG 10 01 JZ	
Fill in this inform	mation to identify your	case:		
Debtor 1	Jacqueline A. Ro	senstiel-Graff		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is an
				amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the /	<b>Property</b>	You	Claim	as	Exempt
---------	----------	-------	-----------------	-----	-------	----	--------

<ol> <li>Which set of exemptions are you claiming? Check one only, even if your spouse is filing with</li> </ol>	. W	Vhich set of exem	ptions are vou claimi	ıa?	Check one only	. even if	vour spouse	is filina	with v	oυ.
--	-----	-------------------	-----------------------	-----	----------------	-----------	-------------	-----------	--------	-----

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	portion you own	AIIIC	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
808 West Jefferson Drive Freeport, IL 61032 Stephenson County	\$35,545.50		\$15,000.00	735 ILCS 5/12-901
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2005 Hyundai Santa Fe 260,000 miles Line from Schedule A/B: 3.1	\$1,725.00		\$2,400.00	735 ILCS 5/12-1001(c)
Lille Hotti Schedule AVB. 3.1			100% of fair market value, up to any applicable statutory limit	
Household Furniture Line from Schedule A/B: 6.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
Line nom Schedule A.B. 4.1			100% of fair market value, up to any applicable statutory limit	
Books, Pictures Line from Schedule A/B: 8.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
Line Horr Schedule A/B. 0.1			100% of fair market value, up to any applicable statutory limit	
Used Clothing Line from Schedule A/B: 11.1	\$400.00		\$400.00	735 ILCS 5/12-1001(a)
LITE TOTAL SCREAME AVE. 11.1			100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Jacqueline A. Rosenstiel-Graff

Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption you claim Specific laws that allows the year of the the year of

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption	
	Checking: US Bank Line from Schedule A/B: 17.1	\$1,600.00		\$1,600.00	735 ILCS 5/12-1001(b)	
	Line from Schedule AVB: 17.1			100% of fair market value, up to any applicable statutory limit		
	LLC 20 % ownership	\$1,300.00		\$1,300.00	735 ILCS 5/12-1001(b)	
	Line from Schedule A/B: 19.1			100% of fair market value, up to any applicable statutory limit		
	401(k): Target Corporation Line from Schedule A/B: 21.1	\$110,000.00		100%	735 ILCS 5/12-1006	
	Line from Schedule AVB: 21.1			100% of fair market value, up to any applicable statutory limit		
	Workers Compensation Claim Line from Schedule A/B: 33.1	Unknown		100%	820 ILCS 305/21	
	Line from Schedule A/B. 33.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3  ■ No  Yes. Did you acquire the property covere  No	3 years after that for ca	ises fi	,	,	

Yes

	Case 18-80777			ed 04/10/18 14:0 L8 of 52	)6:58 Desc M	1ain
Filli	n this information to identify yo					
Deb	tor 1 Jacqueline A. F	Rosenstiel-Graff				
	First Name		ast Name			
		Middle Name La	ast Name			
Unit	ed States Bankruptcy Court for the	: NORTHERN DISTRICT OF ILLING	OIS			
						if this is an ded filing
Sc	botor 1  Jacqueline A. Rosenstiel-Graff First Name Middle Name Last Name  Ditted States Bankruptcy Court for the:  NORTHERN DISTRICT OF ILLINOIS  Ditted States Bankruptcy Court for the:  NORTHERN DISTRICT OF ILLINOIS  Ditted States Bankruptcy Court for the:  NORTHERN DISTRICT OF ILLINOIS  Ditted States Bankruptcy Court for the:  NORTHERN DISTRICT OF ILLINOIS  Ditted States Bankruptcy Court for the:  NORTHERN DISTRICT OF ILLINOIS  Ditted States Bankruptcy Court for the:  NORTHERN DISTRICT OF ILLINOIS  NORTHERN DISTRICT OF ILLINOIS  NORTHERN DISTRICT OF ILLINOIS  Northeet Bankruptcy Court for the:  NORTHERN DISTRICT OF ILLINOIS  Northeet Bankruptcy Court for the:  NORTHERN DISTRICT OF ILLINOIS  Northeet Bankruptcy Court for the:  NORTHERN DISTRICT OF ILLINOIS  Northeet Bankruptcy Court for the:  Northeet Bankrupt		12/15			
		out, number the entries, and attach it to the	his form.	On the top of any addition	al pages, write your na	me and case
. Do	any creditors have claims secured b	y your property?				
	$\square$ No. Check this box and submit	his form to the court with your other sch	nedules.	You have nothing else to	report on this form.	
	Yes. Fill in all of the information	below.				
				. Column A	Column B	Column C
for e	ach claim. If more than one creditor ha	s a particular claim, list the other creditors in		Amount of claim Do not deduct the	Value of collateral that supports this claim	Unsecured portion
2.1		Describe the property that secures the	claim:	\$42,000.00	\$71,091.00	\$0.00
	Creditor's Name	-	port,			
		As of the date you file, the claim is: Chec	ck all that			
	Number, Street, City, State & Zip Code	<u> </u>				
Who	owes the debt? Check one.	☐ Disputed				
	ebtor 1 only	☐ An agreement you made (such as mort	tgage or s	secured		
	ebtor 2 only	car loan)				
	ebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechar	nic's lien)			
<b>A</b>	t least one of the debtors and another	☐ Judgment lien from a lawsuit				
		Other (including a right to offset)	rst Mor	tgage		
Date	debt was incurred	Last 4 digits of account number	-			
ΑΙ	d the dellar value of your entries in (	Column A on this page. Write that number	horo:	\$42,00	0.00	

If this is the last page of your form, add the dollar value totals from all pages. \$42,000.00 Write that number here:

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

O.	400 10 00111	Document	Page 19 of 52	DC30 Main
Fill in this infor	mation to identify your			
Debtor 1	Inoqualina A. Bar	conctiol Croff		
Debior 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name   Middle Name   Last Name    2		Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS	
Case number				
(if known)			1	☐ Check if this is an
				amended filing
Official For	m 106F/F			
		ho Have Unsecure	od Claims	12/15
Schedule G: Exec Schedule D: Credi eft. Attach the Co name and case nu	utory Contracts and Unexpitors Who Have Claims Sec ntinuation Page to this pag Imber (if known).	ired Leases (Official Form 106G ured by Property. If more space e. If you have no information to	<ul> <li>i). Do not include any creditors with partially secured cl</li> <li>is needed, copy the Part you need, fill it out, number the</li> </ul>	laims that are listed in ne entries in the boxes on the
_ ′	, ,	d claims against you?		
	Part 2.			
Yes.				
Part 2: List A	All of Your NONPRIORIT	Y Unsecured Claims		
3. Do any credit	tors have nonpriority unsec	cured claims against you?		
☐ No. You ha	ave nothing to report in this p	art. Submit this form to the court v	vith your other schedules.	
Yes.				
unsecured cla	im, list the creditor separately	for each claim. For each claim lis	sted, identify what type of claim it is. Do not list claims alrea	dy included in Part 1. If more
				Total claim
4.1 Americ	can Express	Last 4 digits of	account number	\$1,667.00
		When was the d	ebt incurred?	
		As of the date v	ou file, the claim is: Check all that apply	
	• •	7.6 C uud uuto ,	ou mo, and ordinates of one of an anal apply	
Debto	or 1 only	☐ Contingent		
☐ Debto	or 2 only	<u> </u>		
☐ Debto	or 1 and Debtor 2 only	<u> </u>		
	ŕ		IORITY unsecured claim:	
		_	;	
debt	aim subject to offset?		rising out of a separation agreement or divorce that you did claims	not
■ No	-		sion or profit-sharing plans, and other similar debts	
☐ Yes		Other. Specif	y Credit Card Purchases	

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**Chase Bank USA** Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Attn: Bankruptcy Dept. PO Box 15298 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit Card Purchases

4.4

\$7,654.00

Document Page 21 of 52 Debtor 1 Jacqueline A. Rosenstiel-Graff Case number (if know) 4.5 City of Freeport Last 4 digits of account number \$133.58 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 524 W Stephenson Freeport, IL 61032 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Services ☐ Yes 4.6 **City of Freeport** Last 4 digits of account number 4050 \$133.58 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 07/2017 524 W Stephenson Freeport, IL 61032 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: lacksquare At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical Debt** Other. Specify 4.7 \$156.26 Comcast Last 4 digits of account number 5854 Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? 05/2017 PO Box 3005 Southeastern, PA 19398 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another

debt

■ No

☐ Yes

☐ Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

■ Other. Specify Utilities

☐ Check if this claim is for a community

Is the claim subject to offset?

Document Page 22 of 52 Debtor 1 Jacqueline A. Rosenstiel-Graff Case number (if know) 4.8 **Discover Financial Services** Last 4 digits of account number \$5.863.00 Nonpriority Creditor's Name PO Box 15316 When was the debt incurred? Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes 4.9 **Discover Financial Services** \$3,335.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 15316 When was the debt incurred? Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes 4.1 Freeport Health Network \$4,795.00 Last 4 digits of account number Nonpriority Creditor's Name 10 West Linden Street When was the debt incurred? Freeport, IL 61032 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

■ Other. Specify Medical Bills

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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4.1 1	Madison Radiologist SC	Last 4 digits of account number	\$231.20
	Nonpriority Creditor's Name PO Box 44428	When was the debt incurred?	
	Madison, WI 53744		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bills	
4.1	Monroe Clinic	Last 4 digits of account number	Unknown
	Nonpriority Creditor's Name		
	2009 5th Street	When was the debt incurred?	
	Monroe, WI 53566  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is. Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bills	
4.1	005.00 4 41 4 4 10 4 44		<b>\$0.470.00</b>
3	OSF St. Anthony Med Center  Nonpriority Creditor's Name	Last 4 digits of account number	\$3,179.00
	Attn: Bankruptcy Dept.	When was the debt incurred?	
	5510 East State St.		
	Rockford, IL 61108-2381		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Bills	
		-1	

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Riverview Law Office, PLLC	Last 4 digits of account number	\$2,139.68
Nonpriority Creditor's Name PO Box 570	When was the debt incurred?	
Sauk Rapids, MN 56379-0570  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Collecting for Creditor	
Swedish American Health System	Last 4 digits of account number	\$234.00
lonpriority Creditor's Name Attn: Bankruptcy Dept. 401 East State Street	When was the debt incurred?	
Rockford, IL 61104  Jumber Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical Bills	
D Bank USA/Target Credit		\$7,807.00
Ionpriority Creditor's Name	Last 4 digits of account number	\$7,007.00
Attn: Bankruptcy Dept.	When was the debt incurred?	
Minneapolis, MN 55440	_	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	☐ Student loans	
☐ Check if this claim is for a community lebt sthe claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
=	<u></u>	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	

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Page 25 of 52 Case number (if know) Debtor 1 Jacqueline A. Rosenstiel-Graff

4.1	US Bank	Last 4 digits of account number	\$3,045.00					
	Nonpriority Creditor's Name PO Box 108	When was the debt incurred?	40,010101					
	Saint Louis, MO 63166		-					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply						
	■ Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	•	· · ·						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>						
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts						
	Yes	Other. Specify Credit Card Purchases	-					
4.1	Wells Fargo Card Service Nonpriority Creditor's Name	Last 4 digits of account number	\$2,743.00					
	Attn: Bankruptcy Dept. PO Box 14517	When was the debt incurred?	-					
	Des Moines, IA 50306	_						
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply						
	Who incurred the debt? Check one.  Debtor 1 only	Continues t						
	_	Contingent						
	Debtor 2 only	Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	■ No	Debts to pension or profit-sharing plans, and other similar debts						
	Yes	■ Other. Specify Credit Card Purchases						
Part 3:	List Others to Be Notified About a De	ebt That You Already Listed						
is tryir have n notifie	ng to collect from you for a debt you owe to so nore than one creditor for any of the debts that d for any debts in Parts 1 or 2, do not fill out o		y here. Similarly, if you					
Name ar	nd Address	On which entry in Part 1 or Part 2 did you list the original creditor?						
	Bankruptcy Dept.	Line 4.7 of (Check one):						
1309 T	echnology Pkwy Falls, IA 50613	■ Part 2: Creditors with Nonpriority Unsecured	Claims					
Ocuai	1 ulis, 1A 00010	Last 4 digits of account number 6715						
Name ar	nd Address	On which entry in Part 1 or Part 2 did you list the original creditor?						
•	x 740256	Line <u>4.8</u> of ( <i>Check one</i> ):						
	a, GA 30374	■ Part 2: Creditors with Nonpriority Unsecured	Claims					
		Last 4 digits of account number						
Name ar	nd Address	On which entry in Part 1 or Part 2 did you list the original creditor?						
Experi		Line 4.8 of (Check one):	ms					
PO Bo	x 4500	Part 2: Creditors with Nonpriority Unsecured						
Allen,	TX 75013		<del></del>					
		Last 4 digits of account number						
	nd Address Ord Mercantile Agency	On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.13 of (Check one):	ims					

Official Form 106 E/F

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Debtor 1 Jacqueline A. Rosenstiel-Graff

Attn: Bankruptcy Dept. 2502 S Alpine Rd	■ Part 2: Creditors with Nonpriority Unsecured Claims						
Rockford, IL 61108	Last 4 digits of account number						
Name and Address		On which entry in Part 1 or Part 2 did you list the original creditor?					
State Collection Service	Line <b>4.13</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims					
Attn: Bankruptcy Dept. PO Box 6250 Madison, WI 53701		■ Part 2: Creditors with Nonpriority Unsecured Claims					
	Last 4 digits of account number						
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?						
State Collection Service	Line <b>4.15</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims					
Attn: Bankruptcy Dept. PO Box 6250 Madison, WI 53701		■ Part 2: Creditors with Nonpriority Unsecured Claims					
Madison, Wi 33701	Last 4 digits of account number						
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?					
TransUnion	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims					
555 West Adams Street Chicago, IL 60661		■ Part 2: Creditors with Nonpriority Unsecured Claims					
	Last 4 digits of account number						

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.	\$	Total Claim
Total claims	01.	Statistic Island	01.	Ψ	0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	50,201.30
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	50,201.30

Fill in this infor	mation to identify your	case:		
Debtor 1	Jacqueline A. Ro			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is amended filing

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the , Street, City, State and ZIP (	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

		Docume	nt Page 28 of	<u> </u>	
Fill in this info	rmation to identify your				
Debtor 1	Jacqueline A. Ro	senstiel-Graff			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)				☐ Check if this is an amended filing	
	orm 106H <mark>e H: Your Cod</mark>	ebtors		12/15	
people are filing ill it out, and no do not name and not name and not	g together, both are equ number the entries in the case number (if known)	ally responsible for supp	lying correct informatio the Additional Page to	s complete and accurate as possible. If two married on. If more space is needed, copy the Additional Page of this page. On the top of any Additional Pages, write as a codebtor.	€,
2. Within t		l lived in a community pro Nevada, New Mexico, Pue		(Community property states and territories include ngton, and Wisconsin.)	
■ No. Go		use, or legal equivalent live	with you at the time?		
in line 2 a	gain as a codebtor only i D), Schedule E/F (Official	f that person is a guarant	or or cosigner. Make su	if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offici 6G). Use Schedule D, Schedule E/F, or Schedule G to	ial
	mn 1: Your codebtor , Number, Street, City, State and Zl	P Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:	t
6642	nard Rosenstiel 2 Sawgrass Drive kford, IL 61114			■ Schedule D, line  □ Schedule E/F, line  □ Schedule G  Northwest Bank Rockford	

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EIII	in this information to identify your ca	200				ı					
		A. Rosenstiel-Graff									
	otor 2 ouse, if filing)				_						
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS								
	se number nown)					☐ An ☐ A s					pter
	fficial Form 106I					MN	1 / DD/ Y	YYY			
S	chedule I: Your Inc	ome									12/15
sup spo atta	as complete and accurate as possibly as complete and accurate as possibly as a correct information. If you use. If you are separated and you ch a separate sheet to this form. The correct	are married and not filing wi	ng jointly, and your s th you, do not inclu	spouse i de inforr	s livi natio	ing with yon about y	ou, inclu our spo	ude inform use. If mo	ation a	bout you ce is need	ır ded,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fili	ing spo	use	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed			[	☐ Employed				
		Linployment status	☐ Not employed			[	☐ Not er	mployed			
	employers.	Occupation	Team Leader	Team Leader							
	Include part-time, seasonal, or self-employed work.	Employer's name	Target Corporat	tion							
	Occupation may include student or homemaker, if it applies.	Employer's address	6560 East State Rockford, IL 61								
		How long employed the	here? 20 year	s							_
Par	Give Details About Mor	nthly Income									
	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	you have nothing to re	eport for	any I	line, write \$	60 in the	space. Incl	ude you	ur non-filir	ng
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	n for all e	mplo	oyers for th	at perso	n on the lin	es belo	w. If you r	need
						For Debte	or 1	For Deb			
2.	List monthly gross wages, sala deductions). If not paid monthly, or			2.	\$	4,0	54.64	\$	I	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	ı	N/A	

Calculate gross Income. Add line 2 + line 3.

4,054.64

N/A

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					For	Debtor 1		non-	Debtor 2 of	use	
	Сор	y line 4 here	4.		\$	4,054	.64	\$		N/A	
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	796	.19	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b	).	\$		.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c	;.	\$		.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d	١.	\$	0	.00	\$		N/A	
	5e.	Insurance	5e	<b>.</b>	\$	274	.91	\$		N/A	
	5f.	Domestic support obligations	5f.		\$	0	.00	\$		N/A	
	5g.	Union dues	5g		\$		.00	\$		N/A	
	5h.	Other deductions. Specify: Life Insurance	5h	1.+	\$		.65			N/A	
		Legal	_		\$		.55	\$		N/A	
		LTD	_		\$	26	.72	\$		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,137	.02	\$		N/A	
7.	Calc	sulate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,917	.62	\$		N/A	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$	0	.00	\$		N/A	
	8b.	Interest and dividends	8b		\$		.00	\$		N/A	
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c 8d		\$		.00	\$ 		N/A N/A	
	8e.	Social Security	8e		\$		.00	\$		N/A	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  Pension or retirement income			\$ \$	0	.00	\$ \$		N/A N/A	
	8h.	Other manufacture and Conselfer			<b>\$</b> —		.00	· —		N/A	
	011.	Other monthly income. Specify:	_ '''	···	Ψ		.00	`		11//	7
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	<u> </u>	0	.00	\$		N/A	
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	2	2,917.62	+ \$		N/A =	\$	2,917.62
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		*-		.,	* -				_,00_
11.	Incluothe	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your refriends or relatives.  Not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe		•	•		•	chedule J		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certaines							12. <b>\$</b>	ombin	2,917.62 ed
13.	Do y ■	you expect an increase or decrease within the year after you file this form?  No.  Yes. Explain:	?						_		income

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FIII	in this information to identify	your case:					
Deb	Jacqueline	A. Rosen	stiel-Graff		Ch	eck if this is:	
Dob	otor 2					An amended filing	
ļ.	ouse, if filing)					13 expenses as of	wing postpetition chapter the following date:
	,						
Unit	ted States Bankruptcy Court for the	ie: NORTI	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
Cas	e number						
(If kı	nown)						
Of	fficial Form 106J						
	chedule J: Your	Expe	nses				12/15
Ве	as complete and accurate a	as possible	e. If two married people ar				or supplying correct
	mber (if known). Answer ev			ioriii. On the top of	any addi	lional pages, write y	your name and case
Par	t 1: Describe Your House	blodes					
1 ai	Is this a joint case?	serioiu					
	■ No. Go to line 2.						
	☐ Yes. Does Debtor 2 live	in a sena	rate household?				
	□ No	, a copa.					
	<u> </u>	ust file Offic	ial Form 106J-2, Expenses	s for Senarate House	hold of De	ahtor 2	
			iai i 01111 1005-2, <i>Expenses</i>	s for Separate Flouse	inola of De	DIOI Z.	
2.	Do you have dependents	? 🗆 No					
	Do not list Debtor 1 and Debtor 2.	■ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the						□ No
	dependents names.			Daughter		12	■ Yes
							□ No
				Son		16	■ Yes
							□ No
							☐ Yes
							□ No
							☐ Yes
3.	Do your expenses include expenses of people other	than	No				
	yourself and your depend		] Yes				
Par	t 2: Estimate Your Ongo	oing Month	ly Expenses				
Est	imate your expenses as of	your bankr	uptcy filing date unless y				
	penses as of a date after the	bankrupto	cy is filed. If this is a supp	olemental Schedule	J, check	the box at the top o	of the form and fill in the
app	olicable date.						
	lude expenses paid for with						
	value of such assistance a ficial Form 106l.)	nd have in	cluded it on <i>Schedule I:</i> \	our Income		Your exp	enses
(011	nciai i omi iooi.j						
4.	The rental or home owner payments and any rent for		-	nclude first mortgage	e 4.	\$	570.00
	If not included in line 4:	<u></u>					
	4a. Real estate taxes				4a.	<b>¢</b>	0.00
	4b. Property, homeowne	r's, or rente	r's insurance		4a. 4b.		0.00
	4c. Home maintenance,	-			4c.		200.00
	4d. Homeowner's associ				4d.	·	0.00
5	Additional mortgage payr	nents for v	our residence, such as ho	me equity loans	5	\$	0.00

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Debtor 1 Jacquel	ine A. Rosenstiel-Graff	Case num	ber (if known)	
6. Utilities:				
	, heat, natural gas	6a.	\$	210.00
	wer, garbage collection	6b.	\$	80.00
•	e, cell phone, Internet, satellite, and cable services	6c.	\$	240.00
6d. Other. Sp		6d.	\$	0.00
	ekeeping supplies	7.	·	650.00
	children's education costs	8.	\$	350.00
	Iry, and dry cleaning	9.		75.00
_	products and services	10.	·	50.00
1. Medical and de		11.		0.00
	Include gas, maintenance, bus or train fare.	11.	Ψ	0.00
Do not include c		12.	\$	300.00
	clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
	tributions and religious donations	14.	·	0.00
5. <b>Insurance.</b>	inbutions and rengious donations	14.	Ψ	0.00
	nsurance deducted from your pay or included in lines 4 or 20.			
15a. Life insura		15a.	\$	0.00
15b. Health ins		15b.		0.00
15c. Vehicle in		15c.	·	94.00
15d. Other insu		15d.		0.00
	nclude taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
Specify:	icide taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
7. Installment or I				
17a. Car paym	ents for Vehicle 1	17a.	\$	0.00
17b. Car paym	ents for Vehicle 2	17b.	\$	0.00
17c. Other. Sp	ecify:	17c.	\$	0.00
17d. Other. Sp	ecify:	17d.	\$	0.00
	of alimony, maintenance, and support that you did not repo		\$	0.00
	your pay on line 5, Schedule I, Your Income (Official Form 10 s you make to support others who do not live with you.	۱۵۱).	\$	0.00
Specify:	s you make to support others who do not live with you.	19.	Ψ	0.00
	erty expenses not included in lines 4 or 5 of this form or on		ur Incomo	
	s on other property	20a.		0.00
20b. Real esta		20b.	· · · · · · · · · · · · · · · · · · ·	0.00
		20b. 20c.		
	homeowner's, or renter's insurance		·	0.00
	nce, repair, and upkeep expenses	20d.	· -	0.00
	ner's association or condominium dues	20e.	•	0.00
1. Other: Specify:		21.	+\$	0.00
•	monthly expenses			
22a. Add lines 4	S .		\$	2,869.00
22b. Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Form 106	J-2	\$	_
22c. Add line 22	a and 22b. The result is your monthly expenses.		\$	2,869.00
3 Calculate vour	monthly net income.			
•	12 (your combined monthly income) from Schedule I.	23a.	\$	2,917.62
	r monthly expenses from line 22c above.	23a. 23b.		
ZSD. Copy you	i monthly expenses from line 220 above.	∠3D.	-φ	2,869.00
	your monthly expenses from your monthly income.	22	•	48.62
The result	t is your monthly net income.	23c.	\$	40.02
24. Do you expect	an increase or decrease in your expenses within the year aft	er you file this	form?	
For example, do ye	ou expect to finish paying for your car loan within the year or do you expec			ase or decrease because o
	terms of your mortgage?			
No.				
∏ Yes	Explain here:			

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Fill in t	his inform	ation to identify your	case:				
Debtor	1	Jacqueline A. Ro	senstiel-Graff				
		First Name	Middle Name	Las	st Name	_	
Debtor							
(Spouse it	f, filing)	First Name	Middle Name	Las	st Name		
United	States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINO	IS		
0						_	
(if known)							☐ Check if this is an
(							amended filing
							·
Officia	al Form	106Dec					
Dec	larati	on About a	an Individual	Debt	or's Sche	dules	12/15
	iaiati	OII About u		DCDU	<u> </u>	<del>daics</del>	12/13
If two m	narried peo	pole are filing together	r, both are equally respo	nsible for s	supplying correct ir	nformation.	
	•						
							ement, concealing property, or
		or property by fraud if U.S.C. §§ 152, 1341, 1		Kruptcy cas	e can result in fine	s up to \$250,0	00, or imprisonment for up to 20
<b>,</b> , .		, , , ,					
	Sign	Below					
Di	id you pay	or agree to pay some	one who is NOT an attor	rney to help	you fill out bankru	uptcy forms?	
	No						
	Yes. Na	ame of person				Attach Bar	nkruptcy Petition Preparer's Notice,
						Declaration	n, and Signature (Official Form 119)
Un	der penalt	v of periury. I declare	that I have read the sum	mary and s	schedules filed with	n this declarati	on and
		true and correct.		,			
v	lal lagge	ualina A. Daganatia	ol Croff	х			
^		ueline A. Rosenstie ine A. Rosenstiel-G		^	Signature of Debto	or 2	
		of Debtor 1	чан		Signature or Debte	<del>-</del>	
	J						
	Date A	pril 10, 2018			Date		

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Fill in	this inform	ation to identify you	r case:			
Debto	or 1	Jacqueline A. Ro	osenstiel-Graff			
		First Name	Middle Name	Last Name		
Debto (Spous	or 2 e if, filing)	First Name	Middle Name	Last Name		
Unite	d States Ban	kruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Case	number					
(if know					_	Check if this is an mended filing
O.(.	-:-!	407				
	cial For		Affaira far Individ	luale Eiling for P	onkruntov	4/4
			Affairs for Individ			4/10
inforn	nation. If mo	ore space is needed,	attach a separate sheet to		equally responsible for sup additional pages, write you	
numb	er (if known ——	). Answer every que:	stion.			
Part '	Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1. V	Vhat is your	current marital statu	ıs?			
	☐ Married ■ Not marr	ied				
2. D			lived anywhere other than y	where you live new?		
2. L	uring the la	st 3 years, nave you	lived anywhere other than v	where you live now?		
	■ No □ Yes. List	all of the places you I	ived in the last 3 years. Do no	ot include where you live now	<i>.</i>	
1	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	No					
-	_	ke sure you fill out Sch	nedule H: Your Codebtors (Of	ficial Form 106H).		
Part 2	Evoloir	the Sources of Vou	r Incomo			
rait /	Explair	the Sources of You	rincome			
F	ill in the total	amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	] No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	ast calendar ary 1 to Dec	year: cember 31, 2017 )	■ Wages, commissions, bonuses, tips	\$47,313.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Deb			Debtor 1	ebtor 1					Debtor 2			
For the calendar year before that:			Sources of income Check all that apply.  Wages, commissions, bonuses, tips		(be	Gross income (before deductions and exclusions) \$41,592.00		Sources of income Check all that apply.  Wages, commissions, bonuses, tips		Gross income (before deductions and exclusions)		
				☐ Operat	ting a business				☐ Operating	a business		
For the calendar year: (January 1 to December 31, 2015)			■ Wages, commissions, bonuses, tips			\$42,000.00		☐ Wages, commissions, bonuses, tips				
				☐ Operat	ting a business				☐ Operating	a business		
<ul> <li>Did you receive any other income during this year or the two previous calendar years?         Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemploy and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and low winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.     </li> <li>List each source and the gross income from each source separately. Do not include income that you listed in line 4.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>												
				Debtor 1					Debtor 2			
				Sources of Describe b		eac (be	oss income from th source fore deductional dusions)		Sources of in Describe belo		Gross income (before deductions and exclusions)	
Par	t 3: List	Certain Pay	ments You	Made Befo	re You Filed for	Bankrı	uptcy					
6.	□ No.	Debtor 1's or Debtor 2's debts primarily consumer debts?  Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by individual primarily for a personal, family, or household purpose."  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?  No. Go to line 7.  Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.  * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.  Debtor 1 or Debtor 2 or both have primarily consumer debts.  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?										
		■ No. □ Yes	include pay	7. each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not yments for domestic support obligations, such as child support and alimony. Also, do not include payments to an r this bankruptcy case.								
	Creditor'	s Name and	Address		Dates of payme	ent	Total amo	ount paid	Amount you still owe	Was this p	ayment for	

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Case number (if known) Document Debtor 1 Jacqueline A. Rosenstiel-Graff

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.											
	No											
	☐ Yes. List all payments to an insider.											
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment						
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.											
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider</li></ul>											
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name						
Pai	t 4: Identify Legal Actions, Repossession	s and Foreclosures										
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.  No Yes. Fill in the details.											
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case						
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.											
	Creditor Name and Address	Describe the Property		Date		Value of the						
		Explain what happened	d		property							
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?  No Yes. Fill in the details.											
	Creditor Name and Address	Describe the action the	creditor took		Date action was Amount taken							
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?  ■ No □ Yes											
Pai	t 5: List Certain Gifts and Contributions											
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  ■ No □ Yes. Fill in the details for each gift.											
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates the g	s you gave ifts	Value							
	Person to Whom You Gave the Gift and Address:											

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<ul> <li>14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$\blue{\text{No}}\$</li> <li>□ Yes. Fill in the details for each gift or contribution.</li> </ul>					\$600 to any charity?	
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal	Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankrup or gambling?	tcy or	since you filed for bankruptcy, did	you lose anyth	ning because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.					
	how the loss occurred	nclude	be any insurance coverage for the I the amount that insurance has paid. I ace claims on line 33 of Schedule A/B:	List pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers			, ,		
16.	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or place any attorneys, bankruptcy petition provided in the least of t	reparir	ng a bankruptcy petition?			rty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou	Description and value of any prop transferred	perty	Date payment or transfer was made	Amount of payment
	Springer Law Firm 5301 East State Street, Suite 105 Rockford, IL 61107		\$500.00		12/2017	\$500.00
17.	Within 1 year before you filed for bankrup promised to help you deal with your credi Do not include any payment or transfer that you ho	tors o	r to make payments to your creditor		r transfer any prope	rty to anyone who
	☐ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any prop transferred	perty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankru transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have alressed No	<b>busin</b> made a	ess or financial affairs? as security (such as the granting of a s			
	Yes. Fill in the details.  Person Who Received Transfer		Description and value of	Describe	ny property or	Date transfer was
	Address Person's relationship to you		property transferred		received or debts	made

Case 18-80777 Doc 1 Filed 04/10/18 Entered 04/10/18 14:06:58 Desc Main Document Page 38 of 52 Case number (if known) Debtor 1 Jacqueline A. Rosenstiel-Graff 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance account number instrument closed, sold. before closing or Address (Number, Street, City, State and ZIP Code) moved, or transfer transferred **Northwest Bank Rockford** XXXX-10/2017 \$149.00 Checking Attn: Bankruptcy Dept. ☐ Savings 3106 N Rockton Ave ☐ Money Market Rockford, IL 61103-2837 □ Brokerage □ Other 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, have it? Address (Number, Street, City, State and ZIP Code) State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Describe the contents Do you still Who else has or had access to it? have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else

Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

Nο

Yes. Fill in the details.

**Owner's Name** Address (Number, Street, City, State and ZIP Code)

Where is the property? (Number, Street, City, State and ZIF Describe the property

Value

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Debtor 1 Jacqueline A. Rosenstiel-Graff

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.						
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.						
Rep	ort a	II notices, releases, and proceedings th	at you know about, regardless of when	they	occurred.		
24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental						ental law?	
		No					
		Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice	
25.	Hav	e you notified any governmental unit of	any release of hazardous material?				
		No					
		Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice	
26.	Hav	e you been a party in any judicial or adr	ninistrative proceeding under any envir	onme	ental law? Include settlements a	and orders.	
	_						
		No Yes. Fill in the details.					
	Cas	se Title	Court or agency	Natu	re of the case	Status of the	
	Cas	se Number	Name Address (Number, Street, City, State and ZIP Code)			case	
Pai	rt 11:	Give Details About Your Business or	Connections to Any Business				
27.	With	nin 4 years before you filed for bankrupt	cy, did you own a business or have any	of t	he following connections to any	/ business?	
	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?   A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partnership						
	☐ An officer, director, or managing executive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation						
	No. None of the above applies. Go to Part 12.						
		• •	in the details below for each business.				
		siness Name	Describe the nature of the business		Employer Identification number		
		dress nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security number or ITIN.		
			·		Dates business existed		

Document Page 40 of 52 Case number (if known) Debtor 1 Jacqueline A. Rosenstiel-Graff 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jacqueline A. Rosenstiel-Graff Signature of Debtor 2 Jacqueline A. Rosenstiel-Graff Signature of Debtor 1 Date Date April 10, 2018 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

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☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	nation to identify your	case:		
Debtor 1	Jacqueline A. Ro	senstiel-Graff		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	kruptov Court for the	NORTHERN DIST	TRICT OF ILLINOIS	
Officed States Bar	kruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Case number				Charle if this is an
(II KIIOWII)				☐ Check if this is an amended filing
If you are an indiverse creditors have you have least You must file this whicher on the fill two married persign and Be as complete a	vidual filing under char claims secured by your dependent of the court was the court wayer is earlier, unless the corm	pter 7, you must fil ur property, or ind the lease has n ithin 30 days after ie court extends th in a joint case, bo		e set for the meeting of creditors, the creditors and lessors you list t information. Both debtors must
Part 1: List Yo	ur Creditors Who Have	e Secured Claims	e: Creditors Who Have Claims Secured by Prope	outs (Official Form 40CD) fill in the
information be	-		What do you intend to do with the property to secures a debt?	,
Creditor's <b>N</b> o	orthwest Bank Rock	rford	<ul><li>☐ Surrender the property.</li><li>☐ Retain the property and redeem it.</li></ul>	□ No
Description of property securing debt:	808 West Jefferson Freeport, IL 61032 County		<ul><li>■ Retain the property and enter into a Reaffirmation Agreement.</li><li>□ Retain the property and [explain]:</li></ul>	■ Yes
For any unexpire in the information	n below. Do not list rea	ase that you listed Il estate leases. Un	in Schedule G: Executory Contracts and Unexperience leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(	the lease period has not yet ended.
Describe your un	nexpired personal pro	perty leases		Will the lease be assumed?
Lessor's name:				□ No
Description of lea	sed			_
Property:				☐ Yes
Lessor's name:				□ No
Description of lea Property:	sed			☐ Yes
Lessor's name:				□ No

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Del	btor 1 🔟	acqueline A. Rosenstiel-Graff	Case number (if known)	
Do	scription (	of leased		
	pperty:	or reaseu		☐ Yes
	ssor's nan			□ No
Description of leased Property:		or reased		☐ Yes
	ssor's nan			□ No
	pperty:	or reased		☐ Yes
Lessor's name: Description of leased				□ No
	pperty:	or reased		☐ Yes
	ssor's nan			□ No
	scription operty:	of leased		☐ Yes
Pai	rt 3: Si	gn Below		
		ty of perjury, I declare that I have indica t is subject to an unexpired lease.	ted my intention about any property of my estate that se	cures a debt and any personal
Χ	/s/ Jac	queline A. Rosenstiel-Graff	X	
	Jacqu	eline A. Rosenstiel-Graff re of Debtor 1	Signature of Debtor 2	
	Date	April 10, 2018	Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-80777 Doc 1 Filed 04/10/18 Entered 04/10/18 14:06:58 Desc Main Document Page 47 of 52

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Northern District of Illinois

In re	Jacqueline A. Rosenstiel-Graff		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	SATION OF ATTOR	RNEY FOR D	EBTOR(S)	
(	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy,	or agreed to be paid	to me, for services r	
	For legal services, I have agreed to accept		<u> </u>	500.00	
	Prior to the filing of this statement I have received			500.00	
	Balance Due		\$	0.00	
2. ′	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. ′	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compen	nsation with any other person	unless they are men	abers and associates of	of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				law firm. A
5.	In return for the above-disclosed fee, I have agreed to rene	der legal service for all aspect	s of the bankruptcy	case, including:	
1	a. Analysis of the debtor's financial situation, and rendering the Preparation and filing of any petition, schedules, stater Representation of the debtor at the meeting of creditors (In the provisions as needed)  Negotiations with secured creditors to recreaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on house	nent of affairs and plan which s and confirmation hearing, and duce to market value; exe s as needed; preparation	may be required; and any adjourned hea emption planning	arings thereof;	filing of
<b>6.</b> ]	By agreement with the debtor(s), the above-disclosed fee of Representation of the debtors in any disc any other adversary proceeding.	does not include the following hargeability actions, judio	g service: cial lien avoidand	es, relief from sta	y actions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for	payment to me for	representation of the	debtor(s) in
Α	pril 10, 2018	/s/ Daniel A. Sprir	nger		
D	ate	Daniel A. Springe			
		Signature of Attorne Springer Law Fire			
		5301 E. State Stre			
		Suite 105 Rockford, IL 6110	18		
		815.312.4725	.•		
		dspringerlaw@gr	mail.com		
		Name of law firm			

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Desc Main

Springer Law Firm

5301 East State St. # 105, Rockford, IL

815.312.4725

### **CHAPTER 7 RETAINER AGREEMENT**

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- The attorney fees for the Chapter 7 bankruptcy are \$500. This is a flat fee arrangement, and does not
  include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law
  Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide
  information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold. Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement. This includes adversary proceedings that may fall under the bankruptcy case. This agreement does not include representation in such adversary proceedings.
- 7. I understand that all money paid towards attorney fees is non-refundable. I understand that once I pay Springer Law, that Springer Law begins work on my case. I understand that the majority of bankruptcy work is done prior to the filing of the case, and because of this the fees are earned even before the filing of the case.
- 8. I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- 9. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.
- 10. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Dated: 12 10	117			
Signature: Signature	Relant	≗ ○ Attorney S	ignature:	3
Print Name:	Roseishelt	Attorney Pr	~	Springer

## **United States Bankruptcy Court**Northern District of Illinois

		1 (of the in District of Immors		
In re	Jacqueline A. Rosenstiel-Graff		Case No.	
		Debtor(s)	Chapter	7
	VE	ERIFICATION OF CREDITOR MAT	RIX	
		Number of Cre	ditors:	23
	The above-named Debtor(s) (our) knowledge.	) hereby verifies that the list of creditors	is true and	correct to the best of my
Date:	April 10, 2018	/s/ Jacqueline A. Rosenstiel-Graff Jacqueline A. Rosenstiel-Graff Signature of Debtor		

American Express PO Box 981537 El Paso, TX 79998

Associated Collectors Inc. 113 W Milwaukee Street PO Box 816 Janesville, WI 53545

CBE Group Attn: Bankruptcy Dept. 1309 Technology Pkwy Cedar Falls, IA 50613

Chase Bank USA Attn: Bankruptcy Dept. PO Box 15298 Wilmington, DE 19850

City of Freeport Attn: Bankruptcy Dept. 524 W Stephenson Freeport, IL 61032

Comcast Attn: Bankruptcy Dept. PO Box 3005 Southeastern, PA 19398

Discover Financial Services PO Box 15316 Wilmington, DE 19850

Equifax PO Box 740256 Atlanta, GA 30374

Experian PO Box 4500 Allen, TX 75013

Freeport Health Network 10 West Linden Street Freeport, IL 61032 Madison Radiologist SC PO Box 44428 Madison, WI 53744

Monroe Clinic 2009 5th Street Monroe, WI 53566

Northwest Bank Rockford Attn: Bankruptcy Dept. 3106 N Rockton Ave Rockford, IL 61103-2837

OSF St. Anthony Med Center Attn: Bankruptcy Dept. 5510 East State St. Rockford, IL 61108-2381

Richard Rosenstiel 6642 Sawgrass Drive Rockford, IL 61114

Riverview Law Office, PLLC PO Box 570 Sauk Rapids, MN 56379-0570

Rockford Mercantile Agency Attn: Bankruptcy Dept. 2502 S Alpine Rd Rockford, IL 61108

State Collection Service Attn: Bankruptcy Dept. PO Box 6250 Madison, WI 53701

Swedish American Health System Attn: Bankruptcy Dept. 1401 East State Street Rockford, IL 61104

TD Bank USA/Target Credit Attn: Bankruptcy Dept. PO Box 673 Minneapolis, MN 55440 TransUnion 555 West Adams Street Chicago, IL 60661

US Bank PO Box 108 Saint Louis, MO 63166

Wells Fargo Card Service Attn: Bankruptcy Dept. PO Box 14517 Des Moines, IA 50306